POSITION	INITIALS	ID NO.	DATE
	_ Á		1/2/
FEE DETERMINATION	0		12/26
O.I.P.E. CLASSIFIER FORMALITY REVIEW		48	1/5/00
RESPONSE FORMALITY REVIEW	16		
	- S10	#67033	1-31-00

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	~	Rejected	N	Non-elected
ν, ζ	=	Allowed	- 1	Interference
Ñ	_	(Through numeral) Canceled	Α	Appeal
2	÷	Restricted		Objected

Γ	Claim Date	Claim	D-1-		
ŀ	1-814 51111	<del></del>	Date	Claim	Date
	Claim Date  Particular Policy	Final Original		Final Original	
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If more than 150 claims or 10 actions staple additional sheet here